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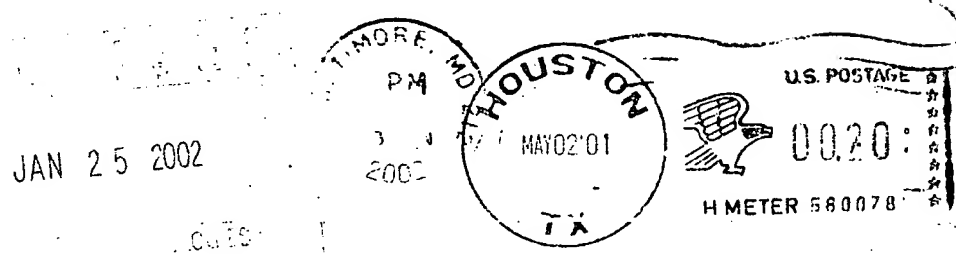
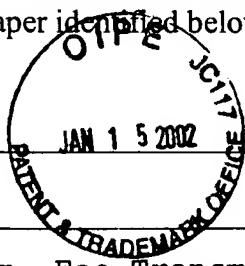
Application Serial No. 09/113,216

Date Filed: July 10, 1998

Type of Paper(s): Transmittal Form, Fee Transmittal  
Copy of Notice of Publication Fee  
Due and Return Postcard

Family No.: 1998U004.US

Date Mailed: November 19, 2001



**UNIVATION TECHNOLOGIES, LLC**  
**5555 SAN FELIPE, SUITE 1950**  
**HOUSTON, TEXAS 77056**

DATE DOCKETED  
1/25/12  
By fak

77056+2746      |||||

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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	09/113,216	
	Filing Date	July 10, 1998	
	First Named Inventor	Agapiou, et al.	
	Group Art Unit	1755	
	Examiner Name	Pasterczyk, J.	
Total Number of Pages in This Submission	3	Attorney Docket Number	1998U004.US

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Preliminary Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Response to Missing Part/ Incomplete Application <input type="checkbox"/> Response to Missing Parts	<input type="checkbox"/> Terminal Disclaimer	1. Copy of Notice of Publication Fee Due
	<input type="checkbox"/> Request for Refund	2. Return Postcard
REMARKS		DATE DOCKETED 11/26/01 By <i>ink</i>

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Or Individual name	Lisa Kimes Jones	Registration No.	41,878
Signature	<i>[Signature]</i>		
Date	November 19, 2001		

CERTIFICATE OF MAILING

I hereby certify having information and a reasonable basis for belief that this correspondence will be deposited with the United States Postal Service as first class mail in an envelope addressed to: Box ISSUE FEE, Commissioner for Patents, Washington, D.C. 20231 on this date:			
			November 19, 2001
Typed or printed name	Tammy L. Hodges		
Signature	<i>Tammy L. Hodges</i>	Date	November 19, 2001

# FEE TRANSMITTAL

Note: Effective November 10, 1998.  
Patent fees are subject to annual revision.

Total Amount of Payment (\$)**300.00**

## METHOD OF PAYMENT (check one)

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any over payment to:

Deposit Account Number: **50-0589**

Deposit Account Name: **Univation Technologies, LLC**

- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17  
☐ Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance

## FEE CALCULATION

### 1. FILING FEE

Large Entity Fee Code	Fee Description	Fee \$	Fee Paid
101 740	Utility filing fee		.00
106 330	Design filing fee		
107 510	Plant filing fee		
108 740	Reissue filing fee		
114 160	Provisional filing fee		
SUBTOTAL (1)			.00

### 2. CLAIMS

	Extra	Fee from below	Fee Paid
Total Claims	<input type="text"/> - 20 = <input type="text"/>	x 18 = <input type="text"/>	.00
Independent Claims	<input type="text"/> - 3 = <input type="text"/>	x 84 = <input type="text"/>	.00
Multiple Dependent Claims	<input type="text"/> 0 x 280.00 = <input type="text"/>		.00

### Large Entity

Fee Code	Fee\$	Fee Description
103	18	Claims in excess of 20
102	84	Independent claims in excess of 3
104	280	Multiple dependent claim
109	84	Reissue independent claims over original patent
110	18	Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)		.00

Complete if Known

Application Number 09/113,216  
Filing Date July 10, 1998  
Inventors Agapiou, et al.  
Group Art Unit 1755  
Examiner Name Pasterczyk, J.  
Attorney Docket Number 1998U004.US

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Fee Code	Large Entity Fee \$	Fee Description	FEES PAID
105	130	Surcharge - late filing fee or oath	
127	50	Surcharge - late provisional filing or cover sheet.	
139	130	Non-English specification	
147	2,520	For filing a request for reexamination	
112	920*	Requesting publication of SIR prior to Examiner action	
113	1,840*	Requesting publication of SIR after Examiner action	
115	110	Extension for reply within first month	
116	400	Extension for reply within second month	
117	920	Extension for reply within third month	
118	1,440	Extension for reply within fourth month	
128	1,960	Extension for reply within fifth month	
119	310	Notice of Appeal	
120	320	Filing a brief in support of an appeal	
121	280	Request for oral hearing	
138	1,510	Petition to institute a public use proceeding	
140	110	Petition to revive - unavoidable	
141	1,280	Petition to revive - unintentional	
142	1,280	Utility issue fee (or reissue)	
143	460	Design issue fee	
144	620	Plant issue fee	
122	130	Petition to the Commissioner	
123	50	Petitions related to provisional applications	
126	180	Submission of information Disclosure Stmt.	
581	40	Recording each patent assignment per property (times number of properties)	
300		Publication Fee	300.00
Other fee (specify) * Reduced by Basic Filing Fee Paid			300.00
SUBTOTAL (3)			

Typed or Printed Name **Lisa Kimes Jones**

Reg. No. **41,878**

Signature

Date

November 19, 2001

Deposit Account User ID